## **BEST AVAILABLE COPY**

## MULTIPLE DE NDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AS FILED AFTER AFTER AS FILED AFTER AFTER AFTER

| 1<br>2<br>3<br>4<br>5<br>6<br>7<br>8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20 | AS F              | DEP.         |      | TER NDMENT DEP. |             | TER ENDMENT DEP. |
|---|-------------------|--------------|------|-----------------|-------------|------------------|
| 2<br>3<br>4<br>5<br>6<br>7<br>8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18                  | IND.              | DEP.         | IND. | DEP.            | IND.        | DEP.             |
| 2<br>3<br>4<br>5<br>6<br>7<br>8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18                  |                   |              |      |                 |             |                  |
| 4<br>5<br>6<br>7<br>8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20                |                   |              |      |                 |             |                  |
| 4<br>5<br>6<br>7<br>8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20                |                   |              |      |                 |             |                  |
| 5<br>6<br>7<br>8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20                     |                   |              |      |                 |             |                  |
| 6<br>7<br>8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20                          |                   |              |      |                 |             |                  |
| 8<br>9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20                                    |                   |              |      |                 |             |                  |
| 9<br>10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20   |                   |              |      |                 |             |                  |
| 10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20  |                   |              |      |                 |             |                  |
| 11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20  |                   |              |      |                 |             |                  |
| 12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20  |                   |              |      |                 |             |                  |
| 14<br>15<br>16<br>17<br>18<br>19<br>20  |                   |              |      |                 |             |                  |
| 15<br>16<br>17<br>18<br>19<br>20  |                   |              |      |                 |             |                  |
| 16<br>17<br>18<br>19<br>20  |                   |              |      |                 |             |                  |
| 17<br>18<br>19<br>20  |                   |              |      |                 |             |                  |
| 18<br>19<br>20  |                   |              |      |                 |             |                  |
| 19<br>20  |                   | 1            |      |                 |             |                  |
|   |                   |              |      |                 |             |                  |
|   |                   |              |      |                 |             |                  |
| 21  |                   |              |      |                 |             |                  |
| 22  |                   |              |      |                 |             |                  |
| 23  |                   |              |      |                 |             | -                |
| 25  |                   |              |      |                 |             |                  |
| 26  | 1                 |              |      |                 |             |                  |
| 27  |                   |              |      |                 |             |                  |
| 28  |                   |              |      |                 |             |                  |
| 29  |                   |              |      |                 |             |                  |
| 30  |                   |              |      |                 |             |                  |
| 32  |                   |              |      |                 |             |                  |
| 33  |                   | <u>-</u>     |      |                 |             |                  |
| 34  |                   |              |      |                 |             |                  |
| 35  |                   |              |      |                 |             |                  |
| 36  |                   |              |      |                 |             |                  |
| 37<br>38  |                   |              |      |                 |             |                  |
| 39  |                   |              |      |                 |             |                  |
| 40  |                   |              |      |                 |             |                  |
| 41  |                   |              |      |                 |             |                  |
| 42  |                   |              |      |                 |             |                  |
| 43  | $\longrightarrow$ |              |      |                 |             |                  |
| 44 45   |                   |              |      |                 | <del></del> |                  |
| 46  |                   |              |      |                 | <del></del> |                  |
| 47  |                   |              |      |                 |             |                  |
| 48  |                   |              |      |                 |             |                  |
| 49  |                   |              |      |                 |             |                  |
| 50  |                   |              |      | <del></del> -l  |             |                  |
| POTAL IND.  |                   | <b>+</b>     |      | ₩               |             | . ♣              |
| TOTAL DEP   | ·                 | <del>-</del> | 7,00 | <b>4</b>        |             | <b>+</b>         |
| TOTAL<br>CLAIMS   |                   |              |      |                 |             |                  |

PTO - 1360 (REV. 11/94)

| 51  | 19        |  |               |      |                |   |  |
|---|-----------|--|---------------|------|----------------|---|--|
| 51  |           | AS FILED   |               |      |                | AFTER 2 MAMENDMENT                      |  |
| 51  |           | IND.   | DEP.          | IND. | DEP.           |   | DEP.   |
| 53 54 55 55 56 57 58 59 60 61 61 62 63 64 65 66 67 70 71 71 72 73 74 75 76 77 78 8 79 80 81 81 82 83 84 85 88 88 89 90 90 91 91 92 93 94 95 96 97 98 99 90 91 91 92 93 94 95 96 97 98 99 99 90 90 91 91 92 93 94 95 96 97 98 99 99 90 90 90 90 90 90 90 90 90 90 90 |           |  | <b>_</b>      |      | ļ              |   |  |
| 54 55 56 57 58 59 60 61 61 62 63 64 65 65 66 67 68 69 70 71 71 72 73 73 74 75 76 77 77 78 8 79 80 81 82 83 84 85 88 89 90 91 91 92 93 94 95 96 97 98 99 99 100 OTAL IND.  |           | -  | <del> </del>  |      |                |   |  |
| 55  | 53        | <b></b>  | <del> </del>  |      | ļ              | ļ                                       | ļ  |
| 56  |           | ┼  | <del> </del>  |      |                | ļ                                       | ļ  |
| 57 58 59 60 61 61 62 63 64 65 66 67 68 69 70 71 71 72 73 73 74 75 76 77 78 8 79 80 81 81 82 83 84 85 86 87 88 88 88 89 90 91 91 92 92 93 94 95 96 97 97 98 98 99 100 OTAL IND.  |           | <del>                                     </del> | <del> </del>  |      |                | <del> </del>                            | <del> </del>                                     |
| 58 59 60 60 61 61 62 63 64 65 66 67 68 69 70 71 71 72 73 74 75 75 76 77 78 8 79 80 81 82 83 84 85 86 87 88 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTALIND.  |           | <del> </del>                                     | <del> </del>  |      |                | ļ                                       | <del></del>                                      |
| 59 60 61 61 61 62 63 64 64 65 66 67 68 8 69 70 71 71 72 73 73 74 75 76 77 77 78 8 79 80 81 81 82 83 84 85 86 87 88 88 89 90 91 91 92 93 94 95 96 97 98 99 99 100 OTAL LIND.   |           | <del></del> -                                    |               |      |                | <del> </del>                            | <del> </del>                                     |
| 60 61 61 62 63 63 64 65 66 67 68 69 70 71 71 72 73 74 75 75 76 77 78 8 79 80 81 82 83 84 85 86 87 88 88 89 90 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND.  | 59        | <del>                                     </del> | 1             |      | <del> </del> - |   | <del> </del>                                     |
| 61 62 63 63 64 65 66 67 68 69 70 71 72 73 74 75 75 76 77 78 79 80 81 81 82 83 84 85 86 87 88 88 89 90 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND.  |           |  |               |      |                |   | <b></b>  |
| 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND   |           | 1  |               |      |                |   | -  |
| 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 81 82 83 84 85 86 87 88 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND   |           |  |               |      |                |   | <del>                                     </del> |
| 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 81 82 83 84 85 86 87 88 89 90 91 91 92 92 93 94 95 96 97 98 99 90 91 100 00TALIND  | 63        |  |               |      |                |   |  |
| 66 67 68 69 70 71 72 73 74 75 76 77 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100  | 64        |  |               |      |                | -                                       |  |
| 67 68 69 70 71 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND OTAL IND OTAL IND OTAL DEP  ***  ***  ***  ***  ***  ***  ***   |           | <u> </u>   |               |      |                |   |  |
| 68 69 70 71 71 72 73 74 75 76 77 78 79 80 81 81 82 83 84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND OTAL IND OTAL IND OTAL DEP  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 69 70 71 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND OTAL IND OTAL IND OTAL DEP  **  **  **  **  **  **  **  **  **  |           | <u> </u>   |               |      |                |   |  |
| 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 OTAL IND. OTAL IND. OTAL IND.  TOTAL CLAIMS   |           | <b> </b>   |               |      |                |   |  |
| 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTALIND.  OTALIND.  OTALIND.  OTALIND.  OTALIND.  TOTAL CLAIMS  | 69_       | <u> </u>   |               |      |                |   |  |
| 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 OTALIND.  TOTAL IND.  TOTAL IND.  TOTAL IND.  TOTAL CLAIMS  |           | ļ  |               |      |                |   |  |
| 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100  OTALIND  OTALIDEP  TOTAL CLAIMS   |           |  |               |      |                |   |  |
| 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 OTAL DEP  TOTAL CLAIMS  |           | ļ  |               |      |                |   |  |
| 75 76 77 78 79 80 81 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 OTAL DEP  |           | <del> </del>                                     |               |      |                |   |  |
| 76 77 78 79 80 81 81 82 83 84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL DEP  TOTAL CLAIMS  | 75        |  | <del>  </del> |      |                |   |  |
| 77 78 79 80 81 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 OTAL DEP  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 TOTAL DEP TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 79 80 81 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100  OTAL IND.  TOTAL CLAIMS  |           | <del> </del>                                     |               |      |                | -                                       |  |
| 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100  OTAL IND.  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 OTALIND  TOTAL DEP  TOTAL CLAIMS   |           |  |               |      |                |   |  |
| 83 84 85 86 87 88 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND.  TOTAL CLAIMS  | 81        |  | -             |      |                |   |  |
| 84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND.  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 TOTAL IND.  TOTAL CLAIMS  |           | <b> </b>   |               |      |                |   |  |
| 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTALIND.  TOTAL CLAIMS   |           | <u> </u>   |               |      |                |   |  |
| 87 88 89 90 91 92 93 94 95 96 97 98 99 100 OTAL IND.  TOTAL DEP.  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 88 89 90 91 91 92 93 94 95 96 97 98 99 100 OTALIND.  TOTAL CLAIMS   |           | ·  |               |      |                |   |  |
| 89 90 91 91 92 93 94 95 96 97 98 99 100 OTALIND.  TOTAL CLAIMS  | _         |  |               |      |                |   |  |
| 90 91 91 92 93 94 95 96 97 98 99 100 OTAL IND  OTAL DEP  TOTAL CLAIMS   |           |  |               |      |                |   |  |
| 91 92 93 94 95 96 97 98 99 100 OTAL IND.  TOTAL DEP.  TOTAL CLAIMS  |           |  |               |      |                | <del></del>                             |  |
| 92 93 94 95 96 97 98 99 100 OTAL IND.  OTAL DEP.  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 93 94 95 96 97 98 99 100 OTAL IND OTAL DEP TOTAL CLAIMS   |           |  |               |      |                |   |  |
| 94 95 96 97 98 99 100 OTAL IND  OTAL DEP.  TOTAL CLAIMS   |           |  |               |      |                |   |  |
| 96 97 98 99 100 OTAL IND.  OTAL DEP.  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 96 97 98 99 100 OTAL IND.  OTAL DEP.  TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 98 99 100 OTAL IND. OTAL DEP. TOTAL CLAIMS  |           |  |               |      |                |   |  |
| 99 100 OTAL IND.  OTAL DEP.  TOTAL CLAIMS   |           |  |               |      |                |   |  |
| TOTAL CLAIMS  |           |  |               |      |                |   |  |
| OTAL DEP. TOTAL CLAIMS  |           |  |               |      |                |   |  |
| TOTAL CLAIMS  | 100       |  |               |      |                |   |  |
| TOTAL CLAIMS  | OTAL IND. |  | #             |      | *              |   | •  |
|   | OTAL DEP  |  | +             |      | +              | - · · · · · · · · · · · · · · · · · · · | <b>←</b>   |
| HE REPARTMENT A COMMERCE  |           |  |               |      |                |   | - Process  |

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